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V.	OWI	ners	ulb		45.0		A.	Name	e of Ir	nstall	ation	's Le	egal C	wne	B. Type of Ownership (enter co						r code								
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VI.	Тур	e of	_		ated	Wa	ste	Act	ivity	(Ma	ark '	X' ii	n the	e app	prop	riate	e bo	xes.	Rei	fer t	o ins	struc							
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4. Underground Injection 5. Market or Burn Hazardous Waste Fuel (enter 'X' and mark appropriate boxes below) c. Burner																													
	16	_			or M					elow)					7. Specification Used Oil Fuel Marketer (or On site Burner)														
☐ b. Other Marketer ☐ c. Burner																													
		ste	Fue	l Bu																							device	(s) in	
which hazardous waste fuel or off-specification used oil fuel is burned. See instructions for definitions of combustion devices.) A. Utility Boiler B. Industrial Boiler C. Industrial Furnace																													
VII	I. M	ode	of '	-	_	-	_	-	nspo	orter	s or		– en	-			e ap	orop	riat	e bo									
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Mar	k 'X' ficati	in th	e ap	prop is no	riate ot you	box ir firs	to in	dicat ificat	e wh	ether	this	is y	our in	nstall on's E	ation PA II	's fir D Nu	st no	tifica in th	tion e sp	of h	azard provid	ous v	waste	acti	vity o	or a s	subseq	uent	
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		- 1		 For Official Use Or 	nly seem to the seem of the se				
					T/A C				
X. Description of Haz A. Hazardous Wastes from				261 21 for each listed h					
from nonspecific sources	your installation hand	dles. Use additional shee	ts if necessary.	zor.si for each listed r	lazardous waste				
1	2	3	4	5	6 1				
Daai									
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7	8	9	10	11	12				
D 11	0		(10.070.0						
B. Hazardous Wastes from specific sources your ins	stallation handles. Use	additional sheets if nece	essary.	32 for each listed haza	rdous waste from				
13	14	15	16	17	18				
				TTTT					
19	20	21	22	23	24				
25	26	27	28	29	30				
C. Commercial Chemical P	Product Hazardous Wa	astes. Enter the four-dig	t number from 40 CFR I	Part 261.33 for each ch	nemical substance				
your installation handles	which may be a hazar	dous waste. Use addition	nal sheets if necessary.						
31	32	33	34	35	36				
37	38	39	40	41	42				
43	44	45	46	47	48				
				TIT					
D. Listed Infectious Wastes pitals, or medical and res					tals, veterinary hos-				
49	50	51	52	53	54				
E. Characteristics of Nonlis	sted Hazardous Waste	es. Mark 'X' in the boxes	corresponding to the ch	naracteristics of nonlist	ed hazardous wastes				
your installation handles.									
1. Ignitable		2. Corrosive	☐ 3. Reactive	ve	4. Toxic				
(D001)		(D002)	(D003)		(D000)				
XI. Certification									
I certify under pena									
this and all attache									
obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.									
Signature) A Name and Official Title (type or print) Date Signed									
1 .11 . 1					2/1/2				
* hullan	+ Kuroll	\times \sim	US	X	3/1/90				

EPA Form 8700-12 (Rev. 11-85) Reverse

94:21119 8-81M1P



ACKNOWLEDGEMENT OF NOTIFICATION

OF HAZARDOUS WASTE ACTIVITY

12/11/89

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER ->

NJD982798167

FACILITY NAME ->

KINDLE FORD LINCOLN MERCURY

MAILING ADDRESS ->

525 STONE HARBOR BLVD CAPE MAY COURT HO*, NJ 08210

INSTALLATION ADDRESS ->

525 STONE HARBOR BLVD CAPE MAY COURT HO*, NJ 08210

EPA Form 8700-12AB (4-80)

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY REGION II 26 FEDERAL PLAZA NEW YORK, NEW YORK 10278

ATTN: PERMITS ADMINISTRATION BRANCH, ROOM 505

TO: CONNELL, BOB

KINDLE FORD LINCOLN MERCURY

525 STONE HARBOR BLVD

CAPE MAY COURT HO*, NJ

United States Environment Washington, D SEPA Notification of Hazard	C 20460		Acti	vitv	Filing this to here	Notifica orm. The	ation beformation	Instruction for expension required to the conservation of the conservation for the conservation of the con	pleting uested Section
For Official Use Only					and R	Recovery	Act).		
	Comments						87.75	3 00 1	
C C									
Installation's EPA ID Number	Appro	oved	(yr.	ate Rece	ived day)			
ENJD982798167	4 C		89	111	03	3			
I. Name of Installation	CONTRACTOR OF								
KINDLE FORD LI	NC	M	ER	c					
II. Installation Mailing Address	ELEMENT S								
5525 STONE HAR	ROR	T	BL	VD					1
City or Town						State		ZIP Code	e
CAPE MAY CH					1	して	08	12	110
II. Location of Installation									
Stree C	t or Route Nun	nber			TT	\neg		TT	7
5									
City or Town	· · ·	1 1	T -			State		ZIP Code	e
6									
V. Installation Contact	TO THE P					F			
Name and Title (last, first, and job title	9)	1 1		Pho	ne Num	ber (are	a code	and num	ber)
CONNELL BOB		0	NR	60	9 6	16	55	500	0 0
V. Ownership			MAGE.		100				
A. Name of Installation's Legal C)wner				В. Т	ype of C)wnersh	nip <i>(enter</i>	code)
BOB CONNELL						7	>		
/I. Type of Regulated Waste Activity (Mark 'X' in the	e appropriat	e box	es. Ref	er to in.	structio	ons.)			
A. Hazardous Waste Activity				B. Used (Activitie	es		
☐ 1a. Generator ☐ 1b. Less than 1,000 kg/mo.	. 6.	Off-Spe	cificatio X' and m	n Used O	il Fuel priate b	oxes be	low)		
☐ 3. Treater/Storer/Disposer				or Marke					
☐ 4. Underground Injection ☐ b. Other Marketer									
5. Market or Burn Hazardous Waste Fuel (enter 'X' and mark appropriate boxes below)		C. Burner							
a. Generator Marketing to Burner		7. Specification Used Oil Fuel Marketer (or On site Burner) Who First Claims the Oil Meets the Specification							
b. Other Marketer	ream on half	Who Fi	rst Claim	is the Oil	Meets t	ne Spec	incation	gaining	
☐ c. Burner /II. Waste Fuel Burning: Type of Combustion Device	enter 'X' in a	ll appro	priate be	xes to inc	dicate tvi	oe of cor	mbustin	n devicel	(s) in
which hazardous waste fuel or off-specification used oil fuel is burn	ned. See instru	ictions	for defin	itions of	combust	ion devi	ices.)		-
A. Utility Boiler B. Industrial Boiler C. Industrial Furnace									
/III. Mode of Transportation (transporters only — enter 'X' in the appropriate box(es)									
	E. Other (spec	ify)							
X. First or Subsequent Notification						987	34.25		
flark 'X' in the appropriate box to indicate whether this is your in otification. If this is not your first notification, enter your installation	on's EPA ID No	imber i	n the spa	or nazaro	ded belov	w.	vity or a	subseq	uent

A. First Notification

☐ B. Subsequent Notification (complete item C)

C. Installation's EPA ID Number

			18	- For Official Use Only	1
		C W			T/A C
X. Description of H	azardous Wastes (co.	ntinued from front)			
A. Hazardous Wastes fr	om Nonspecific Sources. ces your installation handle	Enter the four-digit numb		261.31 for each listed ha	zardous waste
1	2	3	4	5	6
D001	F003	F005			
7	8	9	10	11	12
	om Specific Sources. Ente installation handles. Use a			32 for each listed hazard	ous waste from
13	14	15	16	17	18
19	20	21	22	23	24
25	26	27	28		20
25	26		28	29	30
					re n me partie
C. Commercial Chemics your installation hand	al Product Hazardous Was les which may be a hazardo	tes. Enter the four-digit rous waste. Use additiona	number from 40 CFR I sheets if necessary.	Part 261.33 for each cher	nical substance
31	32	33	34	35	36
37	38	39	40	41	42
		30			
43	44	45	46	47	48
	ntes. Enter the four-digit nuresearch laboratories your		additional sheets if n		s, veterinary hos-
49	50	51	52	53	54
your installation handle	nlisted Hazardous Wastes. es. (See 40 CFR Parts 261.	21 — 261.24)	_		E 140 1 7 .
1. Ignitabl (D001)	e 🗀 :	2. Corrosive (D002)	3. Reactive (DO03)	ve	4. Toxic (D000)
(I. Certification				PARTY AND AND ADDRESS.	EXPLANATION AND ADDRESS OF THE PARTY.
I certify under per this and all attack obtaining the info	nalty of law that I hav hed documents, and t rmation, I believe that ant penalties for subm	hat based on my inc the submitted inform	quiry of those indi- mation is true, acc	ividuals immediately curate, and complete	responsible for . I am aware that
Roll T	BCU	Name and Officia	My M	THE RESERVE TO SERVE THE PARTY OF THE PARTY	Signed 1031-89
PA Form 8700-12 (Re	v. 11-85) Reverse	-3 PM 1:35	VON 68	V	

ALM YORK REGION II

ZOU JESH

CECT COS EMO: NU TOT

State of New Jersey Department of Environmental Protection and Energy Manifest Section CN 028, 401 East State Street Trenton, New Jersey 08625-0028

"Request to Deactivate EPA ID Number"

EPA ID No. NJA 4/1867714 Y	150 982798167
Company Name: KINDLE AVTO FL.	12.4
Site Address: 525 STONE HBCBO. (street) 08210 (ctate) (zip code)	City/town)
(viate) (zip code) Mailing Address: 525 STONE 1/2482.3011	
(state)	(zip code)
Company Contact: Res Kealey	
Reasons for deactivating EPA ID No. (Check all appropr	riate boxes.)
The EPA ID number was obtained for a one time of	leanup which is completed.
The site has completed an ECRA cleanup (indicate	ECRA Case #).
Other SITE GENCATES COUS MAN	27 Chicans Ino or
CC.25/2	
Is the site presently occupied? (circle yes or no)	
Sign and date the application below, and retain the last	page (pink copy) for your records.
William J Kindle (printed name)	(dignature)
(fitle)	(Anto)
Submission of false information is a violation of N.J.A.C.	7:26-5.6 and N.J.A.C. 7:26-7.3.
copies: White - Manifest Section Yellow - USEPA Region II Pink - Applicant	O · ·

The Little Co.